

1 Name: _____

2 Address: _____

3 City, St, Zip: _____

4 Phone: _____

5 Email: _____

6 **In the _____ Judicial District Court of _____ County,**
7 **(number) (county)**
8 **State of Montana**

9 In the Matter of the Estate of: CAUSE NO. _____

10 _____, **FIDUCIARY STATEMENT**

11 Deceased.

12
13 I acknowledge that I will assume the duties and responsibilities of a fiduciary and that I must
14 work exclusively for the benefit of the decedent’s estate and its beneficiaries, the ward under
15 any guardianship, or the protected person under any conservatorship. I also acknowledge
16 that the primary duty of a personal representative, guardian, or conservator is the duty of
17 loyalty to and protection of the best interests of the estate, ward, or protected person.
18 Therefore, I acknowledge that I may not use any of the property or other assets of the
19 decedent’s estate, ward, or protected person for my own personal benefit. I must direct any
20 benefit derived from this appointment to the decedent’s estate, ward, or protected person;
21 and I must avoid conflicts of interest and must use ordinary skill and prudence in carrying out
22 the duties of this appointment.
23

24 **I declare under penalty of perjury under the laws of the state of Montana that the foregoing**
25 **is true and correct.**

26
27 DATED: _____ Signature: _____

28 Printed Name: _____